

United States Bankruptcy Court Northern District of Illinois						Voluntary Petition											
Name of Debtor (if individual, enter Last, First, Middle): Houle, Marilyn S				Name of Joint Debtor (Spouse) (Last, First, Middle): Houle, David A													
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):													
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 4003				Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 8002													
Street Address of Debtor (No. & Street, City, State & Zip Code): 14416 Long Ave Midlothian, IL				Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 14416 Long Ave Midlothian, IL													
ZIPCODE 60445-2450				ZIPCODE 60445-2450													
County of Residence or of the Principal Place of Business: Cook				County of Residence or of the Principal Place of Business: Cook													
Mailing Address of Debtor (if different from street address):				Mailing Address of Joint Debtor (if different from street address):													
ZIPCODE				ZIPCODE													
Location of Principal Assets of Business Debtor (if different from street address above):						ZIPCODE											
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) _____		Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other _____ Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding _____ Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.													
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. ----- Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).													
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						THIS SPACE IS FOR COURT USE ONLY											
Estimated Number of Creditors <table style="width: 100%; border: none;"><tr><td><input type="checkbox"/> 1-49</td><td><input checked="" type="checkbox"/> 50-99</td><td><input type="checkbox"/> 100-199</td><td><input type="checkbox"/> 200-999</td><td><input type="checkbox"/> 1,000-5,000</td><td><input type="checkbox"/> 5,001-10,000</td><td><input type="checkbox"/> 10,001-25,000</td><td><input type="checkbox"/> 25,001-50,000</td><td><input type="checkbox"/> 50,001-100,000</td><td><input type="checkbox"/> Over 100,000</td></tr></table>								<input type="checkbox"/> 1-49	<input checked="" type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> Over 100,000
<input type="checkbox"/> 1-49	<input checked="" type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000			<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> Over 100,000						
Estimated Assets <table style="width: 100%; border: none;"><tr><td><input type="checkbox"/> \$0 to \$50,000</td><td><input type="checkbox"/> \$50,001 to \$100,000</td><td><input checked="" type="checkbox"/> \$100,001 to \$500,000</td><td><input type="checkbox"/> \$500,001 to \$1 million</td><td><input type="checkbox"/> \$1 million to \$10 million</td><td><input type="checkbox"/> \$10 million to \$50 million</td><td><input type="checkbox"/> \$50 million to \$100 million</td><td><input type="checkbox"/> \$100 million to \$500 million</td><td><input type="checkbox"/> \$500,000 to \$1 billion</td><td><input type="checkbox"/> More than \$1 billion</td></tr></table>								<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1 million to \$10 million	<input type="checkbox"/> \$10 million to \$50 million	<input type="checkbox"/> \$50 million to \$100 million	<input type="checkbox"/> \$100 million to \$500 million	<input type="checkbox"/> \$500,000 to \$1 billion	<input type="checkbox"/> More than \$1 billion
<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1 million to \$10 million	<input type="checkbox"/> \$10 million to \$50 million	<input type="checkbox"/> \$50 million to \$100 million	<input type="checkbox"/> \$100 million to \$500 million	<input type="checkbox"/> \$500,000 to \$1 billion	<input type="checkbox"/> More than \$1 billion								
Estimated Liabilities <table style="width: 100%; border: none;"><tr><td><input type="checkbox"/> \$0 to \$50,000</td><td><input type="checkbox"/> \$50,001 to \$100,000</td><td><input type="checkbox"/> \$100,001 to \$500,000</td><td><input checked="" type="checkbox"/> \$500,001 to \$1 million</td><td><input type="checkbox"/> \$1 million to \$10 million</td><td><input type="checkbox"/> \$10 million to \$50 million</td><td><input type="checkbox"/> \$50 million to \$100 million</td><td><input type="checkbox"/> \$100 million to \$500 million</td><td><input type="checkbox"/> \$500,000 to \$1 billion</td><td><input type="checkbox"/> More than \$1 billion</td></tr></table>						<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input checked="" type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1 million to \$10 million	<input type="checkbox"/> \$10 million to \$50 million	<input type="checkbox"/> \$50 million to \$100 million	<input type="checkbox"/> \$100 million to \$500 million	<input type="checkbox"/> \$500,000 to \$1 billion	<input type="checkbox"/> More than \$1 billion		
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Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Houle, Marilyn S & Houle, David A	
Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: None	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: None	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<div style="text-align: center;">Exhibit A</div> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<div style="text-align: center;">Exhibit B</div> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> X /s/ Troy L Gleason Signature of Attorney for Debtor(s) </div> <div> 11/12/08 Date </div> </div>	
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition:			
<input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached a made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
_____ (Name of landlord or lessor that obtained judgment)			
_____ (Address of landlord or lessor)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Houle, Marilyn S & Houle, David A

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Marilyn S Houle

Signature of Debtor

Marilyn S Houle

X /s/ David A Houle

Signature of Joint Debtor

David A Houle

Telephone Number (If not represented by attorney)

November 12, 2008

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Attorney*

X /s/ Troy L Gleason

Signature of Attorney for Debtor(s)

Troy L Gleason 6276510

Printed Name of Attorney for Debtor(s)

Gleason & Gleason

Firm Name

77 W Washington, Ste 1218

Address

Chicago, IL 60602

(312) 578-9530

Telephone Number

November 12, 2008

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X _____

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Houle, Marilyn S & Houle, David A

Printed Name(s) of Debtor(s)

X /s/ Marilyn S Houle

Signature of Debtor

11/12/2008

Date

Case No. (if known) _____

X /s/ David A Houle

Signature of Joint Debtor (if any)

11/12/2008

Date

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Residence at: 14416 Long Ave Midlothian, IL 60445		J	290,000.00	380,514.00

TOTAL290,000.00

(Report also on Summary of Schedules)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X	Checking account	J	100.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.				
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, include audio, video, and computer equipment.		Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.	J	1,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothes	J	300.00
7. Furs and jewelry.		Costume jewelry less than \$500 per piece	J	300.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		05 Chrysler 300 07 Chrysler Van	J J	8,500.00 10,500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			

IN RE Houle, Marilyn S & Houle, David A

Case No.

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
TOTAL				21,200.00

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:
 (Check one box)

☐ 11 U.S.C. § 522(b)(2)
 ☒ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<u>SCHEDULE A - REAL PROPERTY</u>			
Residence at: 14416 Long Ave Midlothian, IL 60445	735 ILCS 5 §12-901	30,000.00	290,000.00
<u>SCHEDULE B - PERSONAL PROPERTY</u>			
Checking account	735 ILCS 5 §12-1001(b)	100.00	100.00
Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.	735 ILCS 5 §12-1001(b)	1,500.00	1,500.00
Clothes	735 ILCS 5 §12-1001(a)	300.00	300.00
Costume jewelry less than \$500 per piece	735 ILCS 5 §12-1001(b)	300.00	300.00
05 Chrysler 300	735 ILCS 5 §12-1001(c)	2,400.00	8,500.00
07 Chrysler Van	735 ILCS 5 §12-1001(c)	2,400.00	10,500.00

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 1061279010529 Americas Servicing Co 7485 New Horizon Way Frederick, MD 21703	J	Mortgage account opened 11/05 VALUE \$ 290,000.00				380,514.00	90,514.00
ACCOUNT NO. Freedman, Anselmo, Lindberg, & Rappe 1807 W Diehl Rd Ste 333 Naperville, IL 60566		Assignee or other notification for: Americas Servicing Co VALUE \$					
ACCOUNT NO. 1002922900 Chrysler Financial 999 Oakmont Plaza Dr Westmont, IL 60559	W	Installment account opened 5/07 VALUE \$ 10,500.00				18,639.00	8,139.00
ACCOUNT NO. 1002909598 Chrysler Financial 999 Oakmont Plaza Dr Westmont, IL 60559	W	Installment account opened 11/06 VALUE \$ 8,500.00				12,942.00	4,442.00
Subtotal (Total of this page)						\$ 412,095.00	\$ 103,095.00
Total (Use only on last page)						\$ 412,095.00	\$ 103,095.00

0 continuation sheets attached

(Report also on
Summary of
Schedules.)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

- ☐ **Domestic Support Obligations**
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
- ☐ **Extensions of credit in an involuntary case**
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
- ☐ **Wages, salaries, and commissions**
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
- ☐ **Contributions to employee benefit plans**
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
- ☐ **Certain farmers and fishermen**
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
- ☐ **Deposits by individuals**
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
- ☐ **Taxes and Certain Other Debts Owed to Governmental Units**
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
- ☐ **Commitments to Maintain the Capital of an Insured Depository Institution**
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
- ☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 91L-018410 1st National Bank Nort C/O Kamm Shapiro & Blumenth 318 W Adams St Ste 1700 Chicago, IL 60606-5100	J	Lawsuit				unknown
ACCOUNT NO. 05M1-135062 American Express PO Box 297871 Fort Lauderdale, FL 33329-7871	J	Lawsuit				6,734.00
ACCOUNT NO. Blitt And Gaines 661 Glenn Ave Wheeling, IL 60090-6017		Assignee or other notification for: American Express				
ACCOUNT NO. 05M1-134167 American Express PO Box 297871 Fort Lauderdale, FL 33329-7871	J	Lawsuit				5,958.00
<div> <div>Subtotal</div> <div>(Total of this page)</div> </div>						\$ 12,692.00
<div> <div>Total</div> <div>(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)</div> </div>						\$

9 continuation sheets attached

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Weltman, Weinberg & Reis 180 N Lasalle St Ste 240 Chicago, IL 60601-2501		Assignee or other notification for: American Express				
ACCOUNT NO. 3499907848865843 Amex P.o. Box 981537 El Paso, TX 79998	H	Revolving account opened 4/90				12,053.00
ACCOUNT NO. 3499906091906003 Amex P.o. Box 981537 El Paso, TX 79998	W	Revolving account opened 10/72				10,290.00
ACCOUNT NO. 01L-000395 Ann Baxter C/O Scott Larsen Esq 161 N Clark St Ste 3575 Chicago, IL 60601-3214	J	Lawsuit				unknown
ACCOUNT NO. 40758063 Arrow Financial Servic 5996 W Touhy Ave Niles, IL 60714	H	Open account opened 12/07				3,222.00
ACCOUNT NO. Hsbc Bank Nevada Na		Assignee or other notification for: Arrow Financial Servic				
ACCOUNT NO. 1279010529 ASC PO Box 5106 Springfield, OH 45501-5106	J	Collections				1.00

Sheet no. 1 of 9 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **25,566.00**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)
\$

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4564190011609111 Aspire/cb And T Po Box 105555 Atlanta, GA 30348	W	Revolving account opened 3/06				1,220.00
ACCOUNT NO. 99M5-000491 Associated Bank GL C/O Murphy & Barry 8150 S Kedzie Ave Chicago, IL 60652-2605	J	Lawsuit				unknown
ACCOUNT NO. 8072233 Bud's Ambulance Service PO Box 659 Dolton, IL 60419-0659	J	Collections				200.00
ACCOUNT NO. 12796197040100091 Cacv Of Colorado Llc 370 17th St Ste 5000 Denver, CO 80202	H	Open account opened 1/04				13,723.00
ACCOUNT NO. Household Bank		Assignee or other notification for: Cacv Of Colorado Llc				
ACCOUNT NO. Law Offices Of Weltman Weinberg Reis 525 Vine St Ste 800 Cincinnati, OH 45202-3122		Assignee or other notification for: Cacv Of Colorado Llc				
ACCOUNT NO. 438864208045 Cap One Po Box 85520 Richmond, VA 23285	W	Revolving account opened 11/01				2,658.00

Sheet no. 2 of 9 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **17,801.00**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)
\$

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Creditors Interchange 80 Holtz Dr Buffalo, NY 14225		Assignee or other notification for: Cap One				
ACCOUNT NO. 529115228926 Cap One Po Box 85520 Richmond, VA 23285	H	Revolving account opened 12/00				1,596.00
ACCOUNT NO. GC Services 6330 Gulfston St Houston, TX 77081-1108		Assignee or other notification for: Cap One				
ACCOUNT NO. Nco Financial 507 Prudential Rd Horsham, PA 19044-2308		Assignee or other notification for: Cap One				
ACCOUNT NO. 444400067890 Chase Bank One Card Serv Westerville, OH 43081	H	Revolving account opened 4/92				13,505.00
ACCOUNT NO. 08M1-166088 Chase Bank One Card Serv Westerville, OH 43081	H	Revolving account opened 8/98				6,308.00
ACCOUNT NO. Arthur B Adler & Assoc 25 E Washington St Ste 500 Chicago, IL 60602-1703		Assignee or other notification for: Chase				

Sheet no. 3 of 9 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **21,409.00**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)
Total
\$

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 9347 Com Ed Customer Care Center PO Box 805379 Chicago, IL 60680-5379	J	Collections				300.00
ACCOUNT NO. Assetcare, Inc 5100 Peachtree Industrial Blvd Norcross, GA 30071		Assignee or other notification for: Com Ed				
ACCOUNT NO. 99L-011755 Dale Zajac C/O James Costello Esq 150 N Wacker Dr Ste 3050 Chicago, IL 60606-1660	J	Lawsuit				unknown
ACCOUNT NO. 00L-006396 Deborah Davis Cooper C/O Mary Jo Kelly Esq 1751 S Naperville Rd Ste 209 Wheaton, IL 60187-8196	J	Lawsuit				unknown
ACCOUNT NO. zm01643 Farmers Insurance Group PO Box 0914 Carol Stream, IL 60132-0001	J	Collections				160.00
ACCOUNT NO. Credit Collection Services PO Box 9134 Needham, MA 02494-9134		Assignee or other notification for: Farmers Insurance Group				
ACCOUNT NO. 00M1-116338 Forest Food Inc C/O Abrams And Abrams Esq 180 W Washington St Ste 910 Chicago, IL 60602-2316	J	Lawsuit				2,959.00

Sheet no. 4 of 9 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **3,419.00**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 99M1-109666 Fox Vending C/O Pierce And Rogul 4246 W 63rd St Chicago, IL 60629-5037	J	Lawsuit				unknown
ACCOUNT NO. 05M1-136913 GE Money Bank PO Box 981064 El Paso, TX 79998-1064	J	Lawsuit				6,218.00
ACCOUNT NO. Blatt Hasenmiller Leibsker Moore 125 S Wacker Dr Ste 400 Chicago, IL 60606-4424		Assignee or other notification for: GE Money Bank				
ACCOUNT NO. 01M1-118526 Gordon Food Service C/O Michael Weis Esq PO Box 1166 Northbrook, IL 60065-1166	J	Lawsuit				6,017.00
ACCOUNT NO. 2218 Gregory Emergency Phys PO Box 7428 Philadelphia, PA 19101-7428	J	Medical or Dental Bill				35.00
ACCOUNT NO. 12881 Heart Care Centers Of Il PO Box 766 Bedford Park, IL 60499-0766	J	Medical or Dental Bill				522.00
ACCOUNT NO. Illinois Collection Service PO Box 1010 Tinley Park, IL 60477-9110		Assignee or other notification for: Heart Care Centers Of Il				

Sheet no. 5 of 9 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **12,792.00**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)
Total
\$

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 93M6-007936 Helen Devoy C/O William Reynolds 9618 S Commercial Ave Chicago, IL 60617-5021	J	Lawsuit				unknown
ACCOUNT NO. 374378001028 Hsbc Bank Po Box 5253 Carol Stream, IL 60197	W	Revolving account opened 1/08				1,378.00
ACCOUNT NO. 017804439252 Kohls/chase N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	H	Revolving account opened 1/86				416.00
ACCOUNT NO. Law Offices Of William J Rackos 11800 S 75th Ave Ste 101 Palos Heights, IL 60463-1062	J	legal fees				500.00
ACCOUNT NO. 95M1-041002 Loretta Paciga No Known Address	J	Lawsuit				unknown
ACCOUNT NO. 6008893799904374 Lvnv Funding Llc Po Box 740281 Houston, TX 77274	H	Open account opened 6/07				1,888.00
ACCOUNT NO. Jc Penney Consumer Ge Capital		Assignee or other notification for: Lvnv Funding Llc				

Sheet no. 6 of 9 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **4,182.00**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)
Total
\$

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 98L-011413 Martha Schmidt C/O James Foley Esq 20 N Clark St 36th Fl Chicago, IL 60602-4109	J	Lawsuit				unknown
ACCOUNT NO. 06M1-187413 Nathnael Lawrence Esq For Finkel Martwick Co 2835 N Sheffield Ave Chicago, IL 60657-5081	J	Lawsuit				9,085.00
ACCOUNT NO. 03152008 Nco Financial For Metro Infectious Disease 507 Prudential Rd Horsham, PA 19044-2308	J	Medical or Dental Bill				52.90
ACCOUNT NO. 869517 Nicor Gas 1844 Ferry Road Naperville, IL 60563	W	Open account opened 1/74				1,478.00
ACCOUNT NO. 06M1-141660 Palisades Collection 210 Sylvan Ave Englewood, NJ 07632-2524	J	Lawsuit				26,046.00
ACCOUNT NO. Bowman, Heintz, Boscia And Vician 8605 Broadway Merrillville, IN 46410-7033		Assignee or other notification for: Palisades Collection				
ACCOUNT NO. Pal1chashb3886970 Palisades Collection L 210 Sylvan Ave Englewood Clif, NJ 07632	H	Open account opened 9/05				26,046.00

Sheet no. 7 of 9 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **62,707.90**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Chase		Assignee or other notification for: Palisades Collection L				
ACCOUNT NO. 7083895502 Park Plaza Dodge 7911 W Roosevelt Rd Forest Park, IL 60130	J	Collections				318.33
ACCOUNT NO. 04M1-161899 Peoples Energy 130 E Randolph St Chicago, IL 60601-6207	J	Lawsuit				12,412.00
ACCOUNT NO. Teller Levit Silvertrust 11 E Adams St 8th Fl Chicago, IL 60603-6301		Assignee or other notification for: Peoples Energy				
ACCOUNT NO. 1241294 Pronger Smith Medical Care 2320 High St Blue Island, IL 60406-2426	J	Medical or Dental Bill				80.00
ACCOUNT NO. 00M6-003005 Robert Gushes C/O John Krafcisin Esq 5839 W 35th St Cicero, IL 60804-4255	J	Lawsuit				unknown
ACCOUNT NO. Roche Scholz Roche & Walsh 10310 Orland Pkwy Ste 202 Orland Park, IL 60467-5628	J	Tax prep				3,115.00

Sheet no. **8** of **9** continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **15,925.33**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)
Total
\$

IN RE Houle, Marilyn S & Houle, David A

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05M5-001556 Sophie Zeller No Known Address	J	Lawsuit				1,237.00
ACCOUNT NO. St Francis Hospital Attn Patient Accts 355 Ridge Ave Evanston, IL 60202-3328	J	Medical or Dental Bill				1,024.00
ACCOUNT NO. Illinois Collection Service PO Box 1010 Tinley Park, IL 60477-9110		Assignee or other notification for: St Francis Hospital				
ACCOUNT NO. 271513217 Tnb - Target Po Box 673 Minneapolis, MN 55440	H	Revolving account opened 10/01				762.00
ACCOUNT NO. 04L-009877 Vivian Sazma C/O Tressler Soderstrom Malon 233 S Wacker Dr 22nd Fl Chicago, IL 60606-6306	J	Lawsuit				unknown
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. **9** of **9** continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **3,023.00**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$ **179,517.23**

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital Status Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S):
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation Name of Employer How long employed Address of Employer	Ranger Meadows Golf Course 2 years	

INCOME: (Estimate of average or projected monthly income at time case filed)	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	\$	\$ 910.00
2. Estimated monthly overtime	\$	\$
3. SUBTOTAL	\$ 0.00	\$ 910.00
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and Social Security	\$	\$ 121.36
b. Insurance	\$	\$
c. Union dues	\$	\$
d. Other (specify)	\$	\$
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 0.00	\$ 121.36
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ 0.00	\$ 788.64
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$	\$
8. Income from real property	\$	\$
9. Interest and dividends	\$	\$
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$	\$
11. Social Security or other government assistance (Specify) Social Security	\$ 2,400.00	\$
12. Pension or retirement income	\$	\$
13. Other monthly income (Specify)	\$	\$
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ 2,400.00	\$
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ 2,400.00	\$ 788.64
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	\$ 3,188.64	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
None

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor’s family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

☐ Check this box if a joint petition is filed and debtor’s spouse maintains a separate household. Complete a separate schedule of expenditures labeled “Spouse.”

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 4,494.00
a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
b. Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
2. Utilities:	
a. Electricity and heating fuel	\$ 250.00
b. Water and sewer	\$ 30.00
c. Telephone	\$ 100.00
d. Other Cable And Internet	\$ 100.00
3. Home maintenance (repairs and upkeep)	\$
4. Food	\$ 400.00
5. Clothing	\$ 50.00
6. Laundry and dry cleaning	\$ 20.00
7. Medical and dental expenses	\$ 200.00
8. Transportation (not including car payments)	\$ 350.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$
10. Charitable contributions	\$
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner’s or renter’s	\$
b. Life	\$
c. Health	\$
d. Auto	\$ 200.00
e. Other	\$
12. Taxes (not deducted from wages or included in home mortgage payments)	
(Specify)	\$
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ 394.00
b. Other 2nd Auto	\$ 304.00
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your home	\$
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$
17. Other Personal Care & Grooming	\$ 100.00
Auto Repairs	\$ 30.00

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.

\$ 7,022.00

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

None

20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$ 3,188.64
b. Average monthly expenses from Line 18 above	\$ 7,022.00
c. Monthly net income (a. minus b.)	\$ -3,833.36

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 23 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: **November 12, 2008**Signature: /s/ Marilyn S Houle
Marilyn S HouleDebtor

Date: **November 12, 2008**Signature: /s/ David A Houle
David A Houle(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition PreparerSocial Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition PreparerDate

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

IN RE:

Case No. _____

Houle, Marilyn S & Houle, David A

Chapter 7

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

- None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

910.00 2008 Income from employment (monthly)

12,648.00 2007 Income from employment

2. Income other than from employment or operation of business

- None ☐ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2,400.00 2006-present income from social security - monthly -

19,966.00 2007 annuity

3. Payments to creditors

Complete a. or b., as appropriate, and c.

- None ☒ **a. Individual or joint debtor(s) with primarily consumer debts:** List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Chase v Houle 08M1-166088	Civil	Cook	Pending
Deutsche Bank v Houle 08CH-28939	Foreclosure	Cook Chancery	Pending

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602		351.00

10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None ☒ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL- SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Rosewood Restaurant		4712 and 4756 Cal Sag Rd Crestwood, IL	Restaurant	Sold 3/15/05 - used proceeds to pay off the IRS and other bills

- None ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
Rosewood Restaurant	4712 and 4756 Cal Sag Rd Crestwood, IL

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

- None ☒ a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

- None ☒ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

- None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

- None ☒ d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the **two years** immediately preceding the commencement of the case by the debtor.

20. Inventories

- None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None ☒ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

21. Current Partners, Officers, Directors and Shareholders

None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None ☒ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

22. Former partners, officers, directors and shareholders

None ☒ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

None ☒ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

23. Withdrawals from a partnership or distributions by a corporation

None ☒ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

24. Tax Consolidation Group

None ☒ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

25. Pension Funds.

None ☒ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **November 12, 2008**

Signature /s/ Marilyn S Houle
of Debtor

Marilyn S Houle

Date: **November 12, 2008**

Signature /s/ David A Houle
of Joint Debtor
(if any)

David A Houle

0 continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

IN RE:

Case No. _____

Houle, Marilyn S & Houle, David A

Chapter 7

Debtor(s)

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 290,000.00		
B - Personal Property	Yes	3	\$ 21,200.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 412,095.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	10		\$ 179,517.23	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 3,188.64
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 7,022.00
TOTAL		21	\$ 311,200.00	\$ 591,612.23	

IN RE:

Case No. _____

Houle, Marilyn S & Houle, David A

Chapter 7

Debtor(s)

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 3,188.64
Average Expenses (from Schedule J, Line 18)	\$ 7,022.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 910.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 103,095.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 179,517.23
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 282,612.23

IN RE:

Case No. _____

Houle, Marilyn S

Chapter 7

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☐ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]*

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- ☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Marilyn S Houle

Date: November 12, 2008

IN RE:

Case No. _____

Houle, David A

Chapter 7

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

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If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- ☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ David A Houle

Date: November 12, 2008

IN RE:

Houle, Marilyn S & Houle, David A

Case No. _____

Chapter **7**

Debtor(s)

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

- ☒ I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.
☐ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
☒ I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
Residence at: 07 Chrysler Van 05 Chrysler 300	Americas Servicing Co Chrysler Financial Chrysler Financial	✓			✓ ✓

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)

11/12/2008	/s/ Marilyn S Houle	/s/ David A Houle	
Date	Debtor	Joint Debtor (if applicable)	
	Marilyn S Houle	David A Houle	

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

IN RE:

Case No. _____

Houle, Marilyn S & Houle, David A

Chapter 7

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors 57

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: November 12, 2008

/s/ Marilyn S Houle

Debtor

/s/ David A Houle

Joint Debtor

Houle, Marilyn S
14416 Long Ave
Midlothian, IL 60445-2450

ASC
PO Box 5106
Springfield, OH 45501-5106

Chase
Bank One Card Serv
Westerville, OH 43081

Houle, David A
14416 Long Ave
Midlothian, IL 60445-2450

Aspire/cb And T
Po Box 105555
Atlanta, GA 30348

Chrysler Financial
999 Oakmont Plaza Dr
Westmont, IL 60559

Gleason & Gleason
77 W Washington, Ste 1218
Chicago, IL 60602

Assetcare, Inc
5100 Peachtree Industrial Blvd
Norcross, GA 30071

Com Ed
Customer Care Center
PO Box 805379
Chicago, IL 60680-5379

1st National Bank Nort
C/O Kamm Shapiro & Blumenth
318 W Adams St Ste 1700
Chicago, IL 60606-5100

Associated Bank GL
C/O Murphy & Barry
8150 S Kedzie Ave
Chicago, IL 60652-2605

Credit Collection Services
PO Box 9134
Needham, MA 02494-9134

American Express
PO Box 297871
Fort Lauderdale, FL 33329-7871

Blatt Hasenmiller Lebsker Moore
125 S Wacker Dr Ste 400
Chicago, IL 60606-4424

Creditors Interchange
80 Holtz Dr
Buffalo, NY 14225

Americas Servicing Co
7485 New Horizon Way
Frederick, MD 21703

Blitt And Gaines
661 Glenn Ave
Wheeling, IL 60090-6017

Dale Zajac
C/O James Costello Esq
150 N Wacker Dr Ste 3050
Chicago, IL 60606-1660

Amex
P.o. Box 981537
El Paso, TX 79998

Bowman, Heintz, Boscia And Vician
8605 Broadway
Merrillville, IN 46410-7033

Deborah Davis Cooper
C/O Mary Jo Kelly Esq
1751 S Naperville Rd Ste 209
Wheaton, IL 60187-8196

Ann Baxter
C/O Scott Larsen Esq
161 N Clark St Ste 3575
Chicago, IL 60601-3214

Bud's Ambulance Service
PO Box 659
Dolton, IL 60419-0659

Farmers Insurance Group
PO Box 0914
Carol Stream, IL 60132-0001

Arrow Financial Servic
5996 W Touhy Ave
Niles, IL 60714

Cacv Of Colorado Llc
370 17th St Ste 5000
Denver, CO 80202

Forest Food Inc
C/O Abrams And Abrams Esq
180 W Washington St Ste 910
Chicago, IL 60602-2316

Arthur B Adler & Assoc
25 E Washington St Ste 500
Chicago, IL 60602-1703

Cap One
Po Box 85520
Richmond, VA 23285

Fox Vending
C/O Pierce And Rogul
4246 W 63rd St
Chicago, IL 60629-5037

Freedman, Anselmo, Lindberg, & Rappe
1807 W Diehl Rd Ste 333
Naperville, IL 60566

Law Offices Of Weltman Weinberg Reis
525 Vine St Ste 800
Cincinnati, OH 45202-3122

Park Plaza Dodge
7911 W Roosevelt Rd
Forest Park, IL 60130

GC Services
6330 Gulfton St
Houston, TX 77081-1108

Law Offices Of William J Rackos
11800 S 75th Ave Ste 101
Palos Heights, IL 60463-1062

Peoples Energy
130 E Randolph St
Chicago, IL 60601-6207

GE Money Bank
PO Box 981064
El Paso, TX 79998-1064

Lvnv Funding Llc
Po Box 740281
Houston, TX 77274

Pronger Smith Medical Care
2320 High St
Blue Island, IL 60406-2426

Gordon Food Service
C/O Michael Weis Esq
PO Box 1166
Northbrook, IL 60065-1166

Martha Schmidt
C/O James Foley Esq
20 N Clark St 36th Fl
Chicago, IL 60602-4109

Robert Gushes
C/O John Krafcsin Esq
5839 W 35th St
Cicero, IL 60804-4255

Gregory Emergency Phys
PO Box 7428
Philadelphia, PA 19101-7428

Nathnael Lawrence Esq
For Finkel Martwick Co
2835 N Sheffield Ave
Chicago, IL 60657-5081

Roche Scholz Roche & Walsh
10310 Orland Pkwy Ste 202
Orland Park, IL 60467-5628

Heart Care Centers Of Il
PO Box 766
Bedford Park, IL 60499-0766

Nco Financial
For Metro Infectious Disease
507 Prudential Rd
Horsham, PA 19044-2308

St Francis Hospital
Attn Patient Accts
355 Ridge Ave
Evanston, IL 60202-3328

Helen Devoy
C/O William Reynolds
9618 S Commercial Ave
Chicago, IL 60617-5021

Nco Financial
507 Prudential Rd
Horsham, PA 19044-2308

Teller Levit Silvertrust
11 E Adams St 8th Fl
Chicago, IL 60603-6301

Hsbc Bank
Po Box 5253
Carol Stream, IL 60197

Nicor Gas
1844 Ferry Road
Naperville, IL 60563

Tnb - Target
Po Box 673
Minneapolis, MN 55440

Illinois Collection Service
PO Box 1010
Tinley Park, IL 60477-9110

Palisades Collection
210 Sylvan Ave
Englewood, NJ 07632-2524

Vivian Sazma
C/O Tressler Soderstrom Malon
233 S Wacker Dr 22nd Fl
Chicago, IL 60606-6306

Kohls/chase
N56 W 17000 Ridgewood Dr
Menomonee Falls, WI 53051

Palisades Collection L
210 Sylvan Ave
Englewood Clif, NJ 07632

Weltman, Weinberg & Reis
180 N Lasalle St Ste 240
Chicago, IL 60601-2501

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE:

Case No. _____

Houle, Marilyn S & Houle, David A

Chapter 7

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ **676.00**

Prior to the filing of this statement I have received \$ **351.00**

Balance Due \$ **325.00**

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - e. [Other provisions as needed]
6. By agreement with the debtor(s), the above disclosed fee does not include the following services:
Litigation / Adversary Proceedings
\$400.00 for Motions to Redeem
Credit Counseling Fees

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

November 12, 2008

Date

/s/ Troy L Gleason

Signature of Attorney

Gleason & Gleason

Name of Law Firm

Form **1040**

U.S. Individual Income Tax Return

2007

IRS Use Only - Do not write or staple in this space.

Label (See instructions on page 12.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign	For the year Jan. 1-Dec. 31, 2007, or other tax year beginning	2007, ending	20	OMB No. 1545-0047
	Your first name and initial	Last name	Your social security number	
	David A.	Houle	324-32-0002	
	If a joint return, spouse's first name and initial	Last name	Spouse's social security number	
	Marilyn M.	Houle	324-32-4003	
	Home address (number and street). If you have a P.O. box, see page 12.			Apt. no.
	14416 Long Ave.			
	City, town or post office, state, and ZIP code. If you have a foreign address, see page 12.			You must enter your SSN(s) above
	Midlothian, IL 60445-2450			Checking a box below will not change your tax or refund

Filing Status	1 <input type="checkbox"/> Single	4 <input type="checkbox"/> Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.	<input type="checkbox"/> You <input type="checkbox"/> Spouse
	2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income)		
	3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here.	5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see page 14)	

Exemptions	6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a	Boxes checked on 6a and 6c	2	
	b <input checked="" type="checkbox"/> Spouse	No. of children on 6c who:		
	c Dependents:	• lived with you		
	(1) First name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input type="checkbox"/> If qualifying child for child tax credit (see page 15)
				• did not live with you due to divorce or separation (see page 16)
				Dependents on 6c not entered above
	d Total number of exemptions claimed	Add numbers on lines above	2	

Income	7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	12,648.
	8a Taxable interest. Attach Schedule B if required	8a	
	b Tax-exempt interest. Do not include on line 8a	8b	
	9a Ordinary dividends. Attach Schedule B if required	9a	
	b Qualified dividends (see page 19)	9b	
	10 Taxable refunds, credits, or offsets of state and local income taxes	10	
	11 Alimony received	11	
	12 Business income or (loss). Attach Schedule C or C-EZ	12	
	13 Capital gain or (loss). Attach Schedule D if required. If not required, check here	13	<3,000.>
	14 Other gains or (losses). Attach Form 4797	14	
	15a IRA distributions	15a	
	b Taxable amount	15b	
	16a Pensions and annuities	16a	
	b Taxable amount	16b	
	17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
	18 Farm income or (loss). Attach Schedule F	18	
	19 Unemployment compensation	19	
	20a Social security benefits	20a	33,648.
	b Taxable amount (see page 24)	20b	8,072.
	21 Other income. List type and amount (see page 24)		
	Des Plaines Development LP		
	22 Add the amounts in the far right column for lines 7 through 21. This is your total income	21	19,966.
		22	37,686.

Adjusted Gross Income	23 Educator expenses (see page 26)	23	
	24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
	25 Health savings account deduction. Attach Form 8889	25	
	26 Moving expenses. Attach Form 3903	26	
	27 One-half of self-employment tax. Attach Schedule SE	27	
	28 Self-employed SEP, SIMPLE, and qualified plans	28	
	29 Self-employed health insurance deduction (see page 26)	29	
	30 Penalty on early withdrawal of savings	30	
	31a Alimony paid b Recipient's SSN	31a	
	32 IRA deduction (see page 27)	32	
	33 Student loan interest deduction (see page 30)	33	
	34 Tuition and fees deduction. Attach Form 8917	34	
	35 Domestic production activities deduction. Attach Form 8903	35	
	36 Add lines 23 through 31a and 32 through 35		
	37 Subtract line 36 from line 22. This is your adjusted gross income		

Form 1040 (2007) David A. & Marilyn M. Houle

324-32-8002

Page 2

Tax and Credits		38 Amount from line 37 (adjusted gross income) 38 37,686.
39a Check <input checked="" type="checkbox"/> You were born before January 2, 1943, <input type="checkbox"/> Blind. <input checked="" type="checkbox"/> Spouse was born before January 2, 1943, <input type="checkbox"/> Blind. Total boxes checked 39a 2		
b If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 and check here 39b		
40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 60,416.		
41 Subtract line 40 from line 38 41 <22,730.>		
42 If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line 6d. If line 38 is over \$117,300, see the worksheet on page 33 42 6,800.		
43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 0.		
44 Tax. Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> Form(s) 8889 44 0.		
45 Alternative minimum tax. Attach Form 6251 45 0.		
46 Add lines 44 and 45 46 0.		
47 Credit for child and dependent care expenses. Attach Form 2441 47		
48 Credit for the elderly or the disabled. Attach Schedule R 48		
49 Education credits. Attach Form 8863 49		
50 Residential energy credits. Attach Form 5695 50		
51 Foreign tax credit. Attach Form 1116 if required 51		
52 Child tax credit (see page 39). Attach Form 8901 if required 52		
53 Retirement savings contributions credit. Attach Form 8880 53		
54 Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859 c <input type="checkbox"/> Form 8839 54		
55 Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form 55		
56 Add lines 47 through 55. These are your total credits 56		
57 Subtract line 56 from line 46. If line 56 is more than line 46, enter -0- 57 0.		
Other Taxes		
58 Self-employment tax. Attach Schedule SE 58		
59 Unreported social security and Medicare tax from: a <input type="checkbox"/> Form 4137 b <input type="checkbox"/> Form 8919 59		
60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 60		
61 Advance earned income credit payments from Form(s) W-2, box 9 61		
62 Household employment taxes. Attach Schedule H 62		
63 Add lines 57 through 62. This is your total tax 63 0.		
Payments		
64 Federal income tax withheld from Forms W-2 and 1099 64 420.		
65 2007 estimated tax payments and amount applied from 2006 return 65		
66a Earned income credit (EIC) 66a		
b Nontaxable combat pay election 66b		
67 Excess social security and tier 1 RRTA tax withheld (see page 59) 67		
68 Additional child tax credit. Attach Form 8812 68		
69 Amount paid with request for extension to file (see page 59) 69		
70 Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885 70		
71 Refundable credit for prior year minimum tax from Form 8801, line 27 71		
72 Add lines 64, 65, 66a, and 67 through 71. These are your total payments 72 420.		
Refund		
73 If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid 73 420.		
74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here 74a 420.		
b Routing number c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings d Account number		
75 Amount of line 73 you want applied to your 2008 estimated tax 75		
Amount You Owe		
76 Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 60 76		
77 Estimated tax penalty (see page 61) 77		
Third Party Designee		
Do you want to allow another person to discuss this return with the IRS (see page 61)? <input checked="" type="checkbox"/> Yes. Complete the following. <input type="checkbox"/> No		
Designee's name Preparer Phone no. Personal identification number (PIN)		
Sign Here		
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
Your signature Date Your occupation Daytime phone number		
Spouse's signature. If a joint return, both must sign. Date Spouse's occupation		
Housewife		
Preparer's		
Preparer's signature Date 2/15/08 Check if self-employed Preparer's SSN or PTIN P00161546		
Use Only		
Firm's name (or yours if self-employed), address, and ZIP code Roche, Scholz, Roche & Walsh, Ltd. EIN 36 2893231		
10310 Orland Parkway - Suite 202 Phone no 708-326-3939		
Orland Park, IL 60467		

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 0
IL: 0

DAVID A. HOULE
14416 LONG AVE
MIDLOTHIAN, IL 60445

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.7500	54.22	420.21	5,777.36
Gross Pay			\$420.21	5,777.36

Deductions	Statutory	
Federal Income Tax	-11.25	91.31
Social Security Tax	-26.06	358.20
Medicare Tax	-6.09	83.77
IL State Income Tax	-12.61	173.33
Other		
Checking Dep	-364.20	
Net Pay		\$0.00

Your federal taxable wages this period are \$420.21

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CITY OF BLUE ISLAND
13051 GREENWOOD AVE
BLUE ISLAND ILLINOIS 60406

Advice number: 00000400259
Pay date: 10-03/2008

Deposited to the account of
DAVID A. HOULE

account number transit ABA amount
\$364.20

JPMorgan Chase Bank, N.A.

VOID AFTER 180 DAYS

NON-NEGOTIABLE

THE ORIGINAL DOCUMENT HAS AN ARTIFICIAL WATERMARK ON THE BACK. HOLD AT AN ANGLE TO VIEW WHEN CHECKING THE WATERMARK.



Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 0
IL: 0

DAVID A. HOULE
14416 LONG AVE
MIDLOTHIAN, IL 60445

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.7500	38.23	296.28	5,357.15
Gross Pay			\$296.28	5,357.15

Deductions	Statutory		
	Social Security Tax	-18.37	332.14
	Medicare Tax	-4.30	77.68
	IL State Income Tax	-8.89	160.72
	Federal Income Tax		80.06
	Other		
	Checking Dep	-264.72	
Net Pay		\$0.00	

Your federal taxable wages this period are \$296.28

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CITY OF BLUE ISLAND
13051 GREENWOOD AVE
BLUE ISLAND ILLINOIS 60406

Advice number: 00000380260
Pay date: 09/19/2008

Deposited to the account of
DAVID A. HOULE

account number transit ABA amount
[REDACTED] \$264.72

VOID AFTER 180 DAYS

THIS IS NOT A CHECK

NON-NEGOTIABLE

JPMorgan Chase Bank, N.A.

THE ORIGINAL DOCUMENT HAS AN EYE SENSITIVE SECURITY FEATURE WHICH CHANGES COLOR WHEN VIEWED UNDER ULTRAVIOLET LIGHT

CITY OF BLUE ISLAND
 13051 GREENWOOD AVE
 BLUE ISLAND ILLINOIS 60406

Period Ending: 08/02/2008
 Pay Date: 08/08/2008



Taxable Marital Status: Married
 Exemptions/Allowances:
 Federal: 0
 IL: 0

DAVID A. HOULE
 14416 LONG AVE
 MIDLOTHIAN, IL 60445

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.7500	57.53	445.86	4,259.28
Gross Pay			\$445.86	4,259.28

Deductions	Statutory	
Federal Income Tax	-13.82	61.44
Social Security Tax	-27.65	264.08
Medicare Tax	-6.47	61.76
IL State Income Tax	-13.38	127.78
Other		
Checking Dep	-384.54	
Net Pay		\$0.00

Your federal taxable wages this period are \$445.86

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CITY OF BLUE ISLAND
 13051 GREENWOOD AVE
 BLUE ISLAND ILLINOIS 60406

Advice number: 00000320252
 Pay date: 08/08/2008

Deposited to the account of
 DAVID A. HOULE

account number transit ABA amount
 [REDACTED] \$384.54

VOID AFTER 180 DAYS

JPMorgan Chase Bank, N.A.

THIS IS NOT A CHECK

NON-NEGOTIABLE

TEAR HERE

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 0
IL: 0

DAVID A. HOULE
14416 LONG AVE
MIDLOTHIAN, IL 60445

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.5000	52.88	396.60	3,418.17
Gross Pay			\$396.60	3,418.17

Deductions	Statutory	
Federal Income Tax	-8.89	38.86
Social Security Tax	-24.59	211.93
Medicare Tax	-5.75	49.56
IL State Income Tax	-11.90	102.54
Other		
Checking Dep	-345.47	
Net Pay	\$0.00	

Your federal taxable wages this period are \$396.60

CITY OF BLUE ISLAND
13051 GREENWOOD AVE
BLUE ISLAND ILLINOIS 60406

Advice number: 00000280265
Pay date: 07/11/2008

Deposited to the account of
DAVID A. HOULE

account number	transit ABA	amount
		\$345.47

JPMorgan Chase Bank, N.A.

VOID AFTER 180 DAYS

NON-NEGOTIABLE

THE ORIGINAL DOCUMENT HAS AN ARTIFICIAL WATERMARK ON THE BACK. ■ HOLD AT AN ANGLE TO THE LIGHT

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 0
IL: 0

DAVID A. HOULE
14416 LONG AVE
MIDLOTHIAN, IL 60445

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.5000	52.33	392.48	3,021.57
Gross Pay			\$392.48	3,021.57

Deductions	Statutory	
Federal Income Tax	-8.48	29.97
Social Security Tax	-24.34	187.34
Medicare Tax	-5.69	43.81
IL State Income Tax	-11.77	90.64
Other		
Checking Dep	-342.20	
Net Pay		\$0.00

Your federal taxable wages this period are \$392.48

CITY OF BLUE ISLAND
13051 GREENWOOD AVE
BLUE ISLAND ILLINOIS 60406

Advice number: 00000260260
Pay date: 06/27/2008

Deposited to the account of
DAVID A. HOULE

account number transit ABA amount
\$342.20

JPMorgan Chase Bank, N.A.

VOID AFTER 180 DAYS

NON-NEGOTIABLE



Earnings Statement

Period Ending: 06/09/2007
Pay Date: 06/15/2007

DAVID A. HOULE
14416 LONG AVE
MIDLOTHIAN, IL 60445

CO. FILE DEPT. CLOCK NUMBER 060
D3C 001518 550 008568459 1

CITY OF BLUE ISLAND
13051 GREENWOOD AVE
BLUE ISLAND ILLINOIS 60406

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 0
IL: 0

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.0000	57.23	400.61	2,363.90
			Gross Pay	\$400.61

Deductions Statutory

Federal Income Tax	-9.29	36.09
Social Security Tax	-24.84	146.56
Medicare Tax	-5.81	34.28
IL State Income Tax	-12.02	70.92
Net Pay		\$348.65

Your federal taxable wages this period are \$400.61



CITY OF BLUE ISLAND
 13051 GREENWOOD AVE
 BLUE ISLAND ILLINOIS 60406

Period Ending: 05/10/2008
 Pay Date: 05/16/2008

Taxable Marital Status: Married
 Exemptions/Allowances:
 Federal: 0
 IL: 0

DAVID A. HOULE
 14416 LONG AVE
 MIDLOTHIAN, IL 60445

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.5000	49.73	372.98	1,942.08
Gross Pay			\$372.98	1,942.08

Deductions	Statutory		
	Federal Income Tax	-6.53	14.33
	Social Security Tax	-23.13	120.41
	Medicare Tax	-5.41	28.16
	IL State Income Tax	-11.19	58.26
Other			
	Checking Dep	-326.72	
Net Pay		\$0.00	

Your federal taxable wages this period are \$372.98

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CITY OF BLUE ISLAND
 13051 GREENWOOD AVE
 BLUE ISLAND ILLINOIS 60406

Advice number: 00000200258
 Pay date: 05/16/2008

Deposited to the account of
 DAVID A. HOULE

account number transit ABA amount
 [REDACTED] \$326.72

JPMorgan Chase Bank, N.A.

VOID AFTER 180 DAYS

THIS IS NOT A CHECK

NON-NEGOTIABLE



Earnings Statement

Period Ending: 03/01/2008
Pay Date: 03/07/2008

DAVID A. HOULE
14416 LONG AVE
MIDLOTHIAN, IL 60445

CO FILE DEPT CLOCK VCHR NO GPP
D3c 001518 550 0000100249 1

CITY OF BLUE ISLAND
13051 GREENWOOD AVE
BLUE ISLAND ILLINOIS 60406

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 0
IL: 0

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.5000	12.70	95.25	619.96
			Gross Pay	\$95.25

Deductions	Statutory	
Social Security Tax	-5.91	38.44
Medicare Tax	-1.38	8.99
IL State Income Tax	-2.86	18.60
Other		
Checking Dep	-85.10	
Net Pay		\$0.00

Your federal taxable wages this period are \$95.25

Case 08-30755 Doc 1 Filed 11/12/08
 CITY OF BLUE ISLAND
 13051 GREENWOOD AVE
 BLUE ISLAND ILLINOIS 60406

Earnings Statement
 Document Page 52 of 55
 Period Ending: 02/16/2008
 Pay Date: 02/22/2008



Desc Main

Taxable Marital Status: Married
 Exemptions/Allowances:
 Federal: 0
 IL: 0

DAVID A. HOULE
 14416 LONG AVE
 MIDLOTHIAN, IL 60445

Social Security Number: XXX-XX-8002

Earnings	rate	hours	this period	year to date
Regular	7.5000	17.78	133.35	524.71
Gross Pay			\$133.35	524.71

Deductions	Statutory		
	Social Security Tax	-8.27	32.53
	Medicare Tax	-1.94	7.61
	IL State Income Tax	-4.00	15.74
	Other		
	Checking Dep	-119.14	
Net Pay		\$0.00	

Your federal taxable wages this period are \$133.35

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CITY OF BLUE ISLAND
 13051 GREENWOOD AVE
 BLUE ISLAND ILLINOIS 60406

Advice number: 0000080254
 Pay date: 02/22/2008

Deposited to the account of
 DAVID A. HOULE

account number	transit ABA	amount
[REDACTED]		\$119.14

JPMorgan Chase Bank, N.A.

VOID AFTER 180 DAYS

NON-NEGOTIABLE

Certificate Number: 00437-ILN-CC-004975888

CERTIFICATE OF COUNSELING

I CERTIFY that on September 23, 2008 at 10:52 o'clock AM MDT.

David Houle received from

Black Hills Children's Ranch, Inc.

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: September 23, 2008 By /s/Linda Randolph

Name Linda Randolph

Title Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 00437-ILN-CC-004975833

CERTIFICATE OF COUNSELING

I CERTIFY that on September 23, 2008 at 10:46 o'clock AM MDT.

Marilyn Houle received from

Black Hills Children's Ranch, Inc.

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Northern District of Illinois, an individual [or group] briefing that complied

with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: September 23, 2008

By: /s/Linda Randolph

Name Linda Randolph

Title Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

IN RE:

Case No. _____

Houle, Marilyn S & Houle, David A

Debtor(s)

Chapter 7

DECLARATION REGARDING ELECTRONIC FILING

Signed by Debtor(s) or Corporate Representative
To Be Used When Filing over the Internet

PART I - DECLARATION OF PETITIONER

A. To be completed in all cases.

Date: October 11, 2008

I (We) Marilyn S Houle and David A Houle, the undersigned debtor(s), corporate officer, partner, or member, hereby declare under penalty of perjury that the information I(we) have given my (our) attorney, including correct social security number(s) and the information provided in the electronically filed petition, statements, schedules, and if applicable, application to pay filing fee in installments, is true and correct. I(we) consent to my(our) attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I(we) understand that this DECLARATION must be filed with the Clerk in addition to the petition. I(we) understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.

B. To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.

☒ I(we) am(are) aware that I(we) may proceed under chapter 7, 11, 12, or 13 of Title 11 United States Code; I(we) understand the relief available under each such chapter; I(we) choose to proceed under chapter 7; and I(we) request relief in accordance with chapter 7.

C. To be checked and applicable only if the petition is a corporation, partnership, or limited liability entity.

☐ I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in the petition.

Signature: _____

(Debtor or Corporate Officer, Partner or Member)

Signature: _____

(Joint Debtor)